File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073



#### FOR INSTRUCTIONS, SEE BACK OF FORM

JA ETHICS AND

AMPAIGN DISCLOSURE 90 PM 11-24-09

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NO

YES

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\$

## **DISCLOSURE SUMMARY PAGE**

	ISCEOSURE SUIVIIVI	ARTPAGE	_	2009 NOV	25 AMII: 07	
COMMITTEE NAME (Must be same as	on Statement of Organization)					
Aistrope for City Council			1 1	R-2		
IMPORTANT: Indicate by # type of committe (1)Statewide/Legislative/Judge Standing for (4)County Central Committee (5)County C Subdivision Candidate (8)County PAC (9 11) Local Ballot Issue	Retention Candidate (2)State PAC andidate (6)City Candidate (7)Sch	ool Board or Other Political	(Rev.	. 07/2007) Iffice Use Onl	DISCLOSURE REPORT	
CANDIDATE COMMITTEES ONLY:			Logge	ed In		
Candidate Name				Scanned		
Gordon Aistrope			Comp	outer		
Office Sought City Council Member	Distric	et (if Senate or House)	Audite	ed		
AMESICA ANAMAS SIGNATURE OF PERSON FILING REP	, <u>(</u> С4) -	194-5881 TELEPHONE		// -24 DATE SI	- 0 <i>9</i> GNED	
I AM FILING A November	REPO	RT FOR (1) ELECTION /	(2)NON-ELE	ECTION YEA	AR.	
(report date)		Indicate by #	1			
☐CHECK IF AMENDMENT TO REPOR	RT DATED		ocal Committ	ees, enter Dat	te of Election	
			11-3-2009			
(You must continue to file reports until a DR-3 is filed.)			County & Loca which Election Wapello		enter County in	
STATEMENT OF	CASH ON HAND					
	reporting period. (Total of all fun T be the same as the cash on har nust be zero if this is first report file	nd at the end	\$ <u>.</u>	677.23		
ADD TOTAL MONEY TAKEN	IN THIS PERIOD					
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)			······	35.77		
Schedule F: Loans Received t	otal (Attach Schedule F)					
	mpaign Property (Attach Schedul					
	to Candidates' Committees Onl					
		SUB-TOTAL	\$_	713.00		
SUBTRACT TOTAL MONEY S	SPENT THIS PERIOD			<b>512.</b> 60		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)				713.00		

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

Schedule F: Loan Repayments total (Attach Schedule F).....

CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ......\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

**CANDIDATE COMMITTEES ONLY:** 

#### For Instructions, See Back of Form

### Reset Form

SCHEDULE

(Rev. 07/03)

MONETARY

**RECEIPTS** 

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)			
(		☐ CHF	CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)		.    —	NDING FORM
Aistrope for City Council			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/21/2009	ID# CK# <sub>13841</sub>	Robert Kramer	n/a	\$25.00	
10/29/2009	ID# CK# 1076	Gordon Aistrope	candidate	10.77	
	ID# CK#				
	ID#				
	ID#				
	CK#				
	CK#				
CK#  ID#  CK#  ID#  CK#  ID#  CK#					
	CK#				
			SUB-TOTAL	\$ 35.77	
		TOTAL (if last pay	ge of this schedule)	\$ 35.77	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of 1 (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE  B (Rev. 07/03)	MONETARY EXPENDITURES
CHE	CK THIS BOX IF

OMMITTEE NAME (Must be same as on Statement of Organization)
il

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/27/2009	ID# CK#1002	Ottumwa Courier	Newpaper Advertising	\$ 420.00
10/29/2009	ID# CK# 1003	Ottumwa Radio	Radio Spots	293.00
	ID# CK#			
	ID#			
	ID#			
			SUB-TOTAL	\$ 713.00
			TOTAL (if last page of this schedule)	\$ 713.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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